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## **State of Connecticut – Appropriations Committee Hearing February 18, 2010**

My name is Barry Kasdan CEO/President of Bridges....A Community Support System Inc. Bridges' is a full service behavioral health agency serving some 9 communities in the greater Milford area. Annually we provide essential mental health and addictions services to over 5,000 adults, children and families. We are funded to a great extent by the State of Connecticut...DMHAS, DCF, DSS and DDS in addition to the United Way of Milford, Town of Orange and the City of Milford and federal grants.

Each year I have given testimony, in both good times and bad, never sure how it influences your thinking and its ultimate impact. Statewide our situation is dire as we see our funds being cut, and our services being dismantled along with a significant rise in critical incidents and loss of life. It keeps me up at night.

This year's crisis compelled me to do something different. Rather than repetitive testimony, I decided on a survey for the Appropriations Committee, with some accompanying data presented in your packet.

1. Do you think it is fair or acceptable that people with chronic mental health and addictions problems will on average die 25 years earlier than you or me?
2. If your answer is no, can you justify cutting services to that population of people?
3. As an elected official, would you consciously decide to spend \$500,000 annually on expensive institutional care when you could avoid that by providing sustainable community care between \$7,500 to \$75,000 annually?
4. If your answer is no, can you justify cutting existing community services that cost between \$7,500 to \$75,000 per year and then incur expenses of \$500,000 annually?
5. If a local business in your community started to see an increase in demand for their services and products, would you encourage private and public investment in them?
6. If you answered yes, would it make any sense to cut off investment and force layoffs?
7. Do you think it is a wise investment of State dollars to support emergency services that can divert people from hospital emergency rooms, avoiding costly hospitalizations?
8. If yes, could you justify cuts to existing emergency/crisis services?
9. If \$1 spent on community treatment can save \$7 in future costs, would you cut those services?
10. In summary, could you justify cuts to essential community services that save lives, support employment and community development along with saving the State of Connecticut millions of dollars a year?

I will leave it up to you to tally the results and ponder the implications of your answers.

## **The Cost of Untreated Mental Illness and Addictive Disorders is Expensive**

- Loss of productivity for mental illness is 63 billion dollars annually in the US.<sup>1</sup>
- Mental Illness is the second leading cause of absenteeism.<sup>2</sup>
- Estimated Cost for Addiction and Drug problems to US businesses is 197 billion dollars annually.<sup>3</sup>
- The life expectancy of people with severe mental illness and addiction disorders is 25 years less than the general population.

## **Treatment is Cost Effective with Demonstrated Results**

- Substance Abuse treatment returns \$2 for every \$1 invested (Use the Alcohol Cost Calculator at <http://www.alcoholcostcalculator.org>).
- Every \$1 spent on community-based treatment can save \$7 in future costs.<sup>4</sup>

## **Supporting Community-Based Treatment Keep our Communities and the State's Economy Running**

- 70 % of people with mental health problems are employed.<sup>5</sup>
- 90% of people with addictive disorders are employed.<sup>5</sup>

**Without adequate community services, people with mental illness and  
addictions problems have a high probability of losing access to:**

- adequate housing
- employment
- community activities
- proper nutrition
- a livable income
- their children and families